

## 2016 Hyde Park Recreation Summer Registration Form

Name of Head of Household	Work phone
Street Address	Home phone/cell phone
Town/City /Zip	E-Mail Address

**Circle One :**      **Member**                                      **Resident**                                      **Non-Resident**

Note: A \$25. deposit for each week of camp is required in order to secure slot.

	Activity Name	EXT	HRS	Participant's Name(s)	D.O.B.	Gender	Amt. Due	Amt. Enclosed	Bal. Due	
		AM	PM							
	2016 Membership(s)	N/A	N/A							
	DAY CAMPS									
<b>Week 1</b>	<b>Day Camp (6/27-7/1)</b>									
<b>Week 2</b>	<b>Day Camp (7/5- 7/8)</b>									
<b>Week 3</b>	<b>Day Camp (7/11 - 7/15)</b>									
	<b>Travel 1</b>									
<b>Week 4</b>	<b>Day Camp (7/18 - 7/22)</b>									
	<b>Sports Camp</b>	N/A								
<b>Week 5</b>	<b>Day Camp (7/25- 7/29)</b>									
	<b>Travel 2</b>									
<b>Week 6</b>	<b>Day Camp (8/1 - 8/5)</b>									
	<b>Theater Arts Camp</b>	N/A	N/A							
<b>Week 7</b>	<b>Day Camp (8/8 - 8/12)</b>									
	<b>AQUATICS</b>									
Session 1	Parent & Child Swim (6/18 - 7/9)									
Session 2	Parent & Child Swim (7/16 - 8/6)									
Session 1	Pre-School Swim (6/18 - 7/9)									
Session 2	Pre-School Swim (7/16 - 8/6)									
Session 1	Swim Lessons (6/27 - 7/8)									
Session 2	Swim Lessons (7/11- 7/22)									
Session 3	Swim Lessons (7/25 - 8/12)									
<b>TOTALS</b>										